

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

05-cv-602(JJF)

WARDEN TOM CARROLL
DELAWARE CORRECTIONAL CENTER
1181 PADDOCK RD.
SMYRNA, DE 19977

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Beatrice Oney*☐ Agent☐ Addressee

B. Received by (Printed Name)

Beatrice Oney

C. Date of Delivery

9/21/05

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0003 0326 9397